

Dec. 19. 2005 11:17AM

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01 FC:1501 1400.00 DA
 02 FC:1504 300.00 DA P. 3
 03 FC:8001 9.00 DA

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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26922 7590 09/27/2005

BASF CORPORATION
 ANNE GERRY SABOURIN
 26701 TELEGRAPH ROAD
 SOUTHFIELD, MI 48034-2442

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Marjorie Ellis

(Depositor's name)

(Signature)

12/ 19 /2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/987,823	11/16/2001	Charles L. Tazzia	IN-5490	7654

TITLE OF INVENTION: AN IMPROVED METHOD FOR MAKING AN AQUEOUS DISPERSION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	12/27/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
CAIN, EDWARD J	1714	524-800000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

BASF Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

26701 Telegraph Road

Southfield, MI. 48034-2442, United State of American

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Anne Gerry Sabourin

Date 12/ 19 /2005

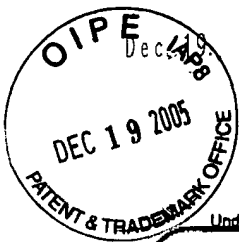
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Anne Gerry Sabourin

Registration No. 33,772

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No. 1739 P. 1

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/087,823	
	Filing Date	11/16/2001	
	First Named Inventor	Charles L. TAZZIA, et al.	
	Art Unit	1714	
	Examiner Name	Cain, Edward J.	
Total Number of Pages in This Submission	04	Attorney Docket Number	IN-5490

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
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	The Commissioner is hereby authorized to charge any fees, which may be required or credit any overpayment to Deposit Account Number 23-3425.	
	I have enclosed a duplicate copy of this sheet.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	BASF Corporation		
Signature			
Printed name	Anne Gerry Sabourin		
Date	12/19/2005	Reg. No.	33,772

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Marjorie Ellis	Date	12/19/2005

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